

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	BLOCK DATA MIGRATION
Attorney Docket Number::	EQLC-P01-003
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	9
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	G.
Middle Name::	Paul
Family Name::	Koning
City of Residence::	Nashua
State or Province of Residence::	NH
Country of Residence::	US
Street of mailing address::	408 Joe English Road
City of mailing address::	New Boston
State or Province of mailing address::	NH

Postal or Zip Code of mailing address:: 03070

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Peter  
Middle Name:: C.  
Family Name:: Hayden  
City of Residence:: Mount Vernon  
State or Province of Residence:: NH  
Country of Residence:: US  
Street of mailing address:: 17 Purgatory Road  
City of mailing address:: Mount Vernon  
State or Province of mailing address:: NH  
Postal or Zip Code of mailing address:: 03057

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Paula  
Family Name:: Long  
City of Residence:: Hollis  
State or Province of Residence:: NH  
Country of Residence:: US  
Street of mailing address:: 25 Winchester Drive  
City of mailing address:: Hollis  
State or Province of mailing address:: NH  
Postal or Zip Code of mailing address:: 03049

### **Correspondence Information**

Correspondence Customer Number:: 28120

**Representative Information**

Representative Customer Number:: 28120

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/441810	01/21/03

**Assignee Information**

Assignee name:: EQUALLOGIC INC.  
Street of mailing address:: 9 Townsend West  
City of mailing address:: Nashua  
State or Province of mailing address:: NH  
Postal or Zip Code of mailing address:: 03063